

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007
PHONE (602) 364-1PET (1738) FAX (602) 364-1039
VETBOARD.AZ.GOV

COMPLAINT INVESTIGATION FORM

*If there is an issue with more than one veterinarian please file a
separate Complaint Investigation Form for each veterinarian*

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: MAY 7, 2020

Case Number: 20-103

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: Hanna Wachtel, DVM

Premise Name: 1st Pet Veterinary Centers

Premise Address: 18453 N. 7th Avenue

City: Phoenix

State: Az

Zip Code: 85023

Telephone: (623) 849-0700

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: Lori Deis

Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Home Telephone: [REDACTED]

Cell Telephone: [REDACTED]

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL
RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE
REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE
COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

received
5/7/20

C. PATIENT INFORMATION (1):

Name: Zeke Deis
Breed/Species: Chihuahua Dachshund Mix - Dog
Age: 16 1/2 years Sex: Male Color: Redish Brown

PATIENT INFORMATION (2):

Name: _____
Breed/Species: _____
Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.

Hanna Wachtel DVM
Ryan Lunt DVM
Arielle Hatcher DVM
Brian Toncray DVM

All vets at 1st Pet



E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

Lisa Scott - _____

She was listening to many of the calls from the vets

Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Lari Deis

Date: 5/5/20

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

On Thursday April 9, 2020 I arrived home to find a foster dog and a personal dog attacking our dog Zeke. I immediately took him to 1st Pet Veterinary Center which is about 2 blocks from my home.

He had very bad neck wounds. He was treated and kept overnight. The following morning Friday (4/10/20) Dr Lunt performed surgery to close his wounds. He called me afterwards to say he was very pleased with how the surgery went. Zeke was able to walk on his own, urinate and ate a bit of food so he was released to me later that day.

The vet (Hanna Wachtel) released him to me with only Tramadol and Gabapentin. I wasn't aware he did not have any long term acting antibiotics.

Once home I was at his side 24/7 caring for him. I only left him long enough to shower and then my husband would sit with him until I was done. He was improving. Zeke was scheduled for his drain removal on Monday 4/13/20 at 8:00 P.M. I drove him up there and they did not remove his drain but sent me home with Amoxicillin/Clavulanate that evening. This would be more than 72 hours since his release on Friday. I really believe someone was aware (obviously) that he had not been on any antibiotics since his release on Friday and that is why they sent me home with some. I would have done anything at that point to get him on some strong antibiotics including hospitalizing him once again if someone would have been honest with me.

Zeke was scheduled on Wednesday (4/15/20) for removal of necrotic skin. Around 11:30 P.M. on Tuesday (4/14/20) he deteriorated very quickly. He was shaking and was limp and could not hold his body up. My heart told me he had become septic. We chose to euthanize just after midnight.

I did not realize until days later that he did not have any antibiotics on board at all. I emailed 1st Pet on 4/20 and 4/21 with no response so I called them on 4/22 and asked to speak to Dr Lunt who did his surgery and who is also a director at the clinic. I did not get a return call until 4/24 (which I could not answer) but did call back within about 45 minutes. I called again on 4/28 and left another message. He finally called me back on 4/29.

Dr Lunt was very sympathetic and did admit that there was a huge mistake made by Hanna Wachtel in not sending antibiotics home with our boy. They have subsequently refunded all our money (\$4167.00) which in no way makes us feel any better about the incompetence and negligence by Hanna Wachtel.

This should NEVER have happened. He was improving. Improving enough that they were going to do another surgery. There should have been protocols in place to prevent this. SOMEONE else should have looked over his discharge instructions and realized the MISTAKE that was made. This can NEVER be allowed to happen to anyone else. We had Zeke since he could fit in the palm of your hand. The heartbreak and guilt for not catching her mistake is consuming my life. 1st Pet MUST change their protocols to prevent this to EVER happening to another family!!

June 5, 2020

Arizona State Veterinary Medical Examining Board
1740 West Adams Street, Ste. 4600
Phoenix, Arizona 85007

Response to 20-103 (In re: Hanna Wachtel DVM)

To Whom It May Concern:

Zeke Deis, a 16.5yr castrated male Dachshund mix, was presented to 1st Pet Veterinary Centers-North Valley on April 9, 2020 after the owner returned home to find Zeke being attacked by two other dogs in the home. He had been previously prescribed Novox (generic carprofen), a non-steroidal anti-inflammatory medication, and was taking a CBD tincture prior to presentation.

Zeke was initially examined and treated by Dr. Heather Sanchez. Zeke had numerous puncture wounds on his head and neck and was rushed to the ICU. Emergency stabilization was authorized by his owner. He was in shock, but responsive with a low body temperature and prolonged capillary refill time. An intravenous catheter was placed, and analgesia and intravenous fluids were administered. Dr. Sanchez gave Zeke a guarded prognosis as noted in the medical record for April 9, 2020.

Once Zeke was stabilized, the owner elected to proceed with blood work and radiographs to determine the extent of the trauma prior to hospitalization and surgery. A markedly elevated lactate and an elevated ALT, a liver enzyme, was noted on the blood work. Radiographs revealed severe soft tissue trauma, subcutaneous emphysema, a mild pneumomediastinum, and hypovolemia. A possible fracture of C5 vertebral body and probable intervertebral disc disease at C2-C3 and C6-C7 were noted. Zeke was hospitalized on intravenous fluids, a single dose of hypertonic saline, hydromorphone, and ampicillin/sulbactam.

Once Zeke was sufficiently stable for anesthesia, surgery was performed on April 10 between 4-6am with Dr. Ryan Lunt. The wounds were debrided and closed with use of a Jackson Pratt drain. Zeke's discharge instructions were inserted into the medical record but not completed. His anesthetic recovery post-surgery was uneventful.

During the morning after surgery, Dr. Lunt and I rounded at the start of my shift, and discussed Zeke's case. Analgesia was discussed and prescribed with plans to continue Novox. Zeke was then transferred to me for anesthetic recovery, pain management, and nutrition monitoring with a plan to discharge him to his owner when appetent. Analgesia was weaned from hydromorphone to buprenorphine and gabapentin. Zeke ate a small amount of baby food without evidence of nausea and was discharged to the owner with analgesics (tramadol and gabapentin) along with recommendations to continue use of Novox.

It is standard procedure at 1st Pet that the doctor performing surgery prescribes medications and completes discharge instructions. Antibiotics were not prescribed by Dr. Lunt, and Zeke was discharged without them. Unfortunately, during the current Coronavirus Pandemic, we have had higher than normal caseloads and standard procedures have been difficult and, in some cases, impossible to follow. With respect to this particular case, we had an extraordinarily high patient volume and while I recall rounding the case and discussing pain medications, I do not recall discussing antibiotic recommendations with Dr. Lunt. Also, because of lack of direct client interaction, I did not have a typical discharge conversation and have never met or spoken with Zeke's owners. In any event, antibiotics beyond the injectables that were administered while in hospital were not prescribed by Dr. Lunt and Zeke was discharged without them.

A recheck appointment was performed by Dr. Arielle Hatcher on April 13. On entry, Zeke was reportedly doing better according to Angelina Hineman, a technician. Concerns for necrotic tissue were present, and a surgery with tissue debridement was scheduled for April 15. An antibiotic (amoxicillin/clavulanate) was prescribed at that time. On the night prior to his scheduled surgery, Zeke presented for humane euthanasia.

The oversight with respect to not prescribing antibiotics at discharge was a mistake for which the practice has taken responsibility for. Although there was no guarantee that the outcome for Zeke would have been different even if antibiotics had been prescribed sooner, the owner was given a full refund in the amount of \$4,167.00 prior to the filing of this Complaint. Additionally, we have significantly increased staffing of emergency doctors and technicians in an attempt to meet the increased needs of our patients and clients during these difficult times.

Respectfully Submitted,

Hanna Wachtel, D.V.M.



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VETBOARD.AZ.GOV

INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, DVM - Chair
Christina Tran, DVM
Carolyn Ratajack
Jarrod Butler, DVM
Steven Seiler

STAFF PRESENT: Tracy A. Riendeau, CVT – Investigations
Marc Harris – Assistant Attorney General

RE: Case: 20-103

Complainant(s): Lori Deis

Respondent(s): Hanna Wachtel, DVM (License: 6556)

SUMMARY:

Complaint Received at Board Office: 5/7/20

Committee Discussion: 10/6/20

Board IIR: 11/18/20

APPLICABLE STATUTES AND RULES:

Laws as Amended August 2018

(Lime Green); Rules as Revised September 2013 (Yellow).

On April 9, 2020, "Zeke," a 16.5 year-old male Chihuahua mix was presented to 1st Pet Veterinary Centers after being attacked by dogs. The dog was hospitalized for treatment and diagnostics once stabilized.

The next day, surgery was performed to debride wounds and place a drain; the dog was discharged later that day with pain medication.

On April 13, 2020, the dog was presented to 1st Pet Veterinary Centers for a recheck and possible drain removal. It was recommended to have the dog re-evaluated and have necrotic skin removed in two days. The dog was discharged with antibiotics.

The following evening, due to the dog's declining condition, he was humanely euthanized.

Complainant was noticed and appeared telephonically.

Respondent was noticed and appeared telephonically. Attorney David Stoll was present.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: *Lori Deis*
- Respondent(s) narrative/medical record: *Hanna Wachtel, DVM*

PROPOSED 'FINDINGS of FACT':

1. On April 9, 2020, the dog was presented to 1st Pet Veterinary Centers on emergency after being attacked by two other dogs in the home. Dr. Sanchez evaluated the dog; he was shocky and not very responsive. The dog had multiple puncture wounds over his head and caudal neck, as well as a large laceration on the left side of the neck exposing muscle and blood vessels; no active bleeding. Complainant approved initial treatment and supportive care was administered to the dog.

2. Due to COVID-19 protocols, Dr. Sanchez discussed her findings with Complainant over the phone. She recommended blood work, radiographs and continued supportive care and stabilization. At that time, the dog was not stable for wound care. An estimate was provided for diagnostics and wound care/laceration repair with drain, and hospitalization for 12 – 24 hours. Complainant consented to blood work and radiographs to start.

3. The dog was hospitalized for IV fluids, hydromorphone, hypertonic saline, and unasyn. Radiographs were performed and revealed soft tissue trauma to the caudal skull and cervical region, with moderate to severe soft tissue swelling and subcutaneous emphysema; possible trauma to the larynx, esophagus or trachea; mild pneumomediastinum; hypovolemia; possible small fracture of C5; and IVDD.

4. The dog's wounds were clipped and cleaned.

5. On April 10, 2020, the dog was sufficiently stable for anesthesia therefore Dr. Lunt debrided the dog's wounds and placed a Jackson Pratt drain. According to Respondent, the dog's discharge instructions were inserted into the medical record but not completed. The dog recovered uneventfully.

6. Later that morning, Respondent was rounded by Dr. Lunt on the case. Analgesia was discussed and prescribed with plans to continue Novox (current medication prior to hospitalization); the dog was transferred to Respondent for anesthetic recovery, pain management, and nutrition monitoring with a plan to discharge the dog if eating. Analgesia was weaned from hydromorphone to buprenorphine and gabapentin. The dog ate a small amount of baby food therefore was discharged to Complainant with Tramadol and gabapentin along with instructions to continue the use of Novox.

7. On April 13, 2020 (Monday), the dog was presented to 1st Pet Veterinary Centers for a recheck and possible drain removal; the dog was evaluated by Dr. Hatcher. She discussed with Complainant that the dog would likely need further wound debridement to remove the necrotic tissue along the dog's neck. The wound may be able to close after the debridement but it may also require management as an open wound with frequent bandage changes. The dog was discharged for the first time with antibiotics and instructions to return on Wednesday for drain removal and surgical wound care. Complainant was to continue to warm compress the wounds, 10 – 15 minutes at a time, at least four times a day, and continue to clean the neck skin folds as well.

8. On April 14, 2020, shortly before midnight, Complainant stated the dog deteriorated quickly – he was shaking, limp and could not get up. The dog was presented to 1st Pet Veterinary Centers and was humanely euthanized.

9. Complainant realized that the dog had not been discharged with antibiotics and reached out to Dr. Lunt, the responsible veterinarian for the premises. Complainant stated that Dr. Lunt admitted the error that Respondent did not send the dog home with antibiotics and subsequently Dr. Lunt refunded Complainant's money.

10. Respondent stated in her narrative that it is standard procedure at the premises that the doctor performing the surgery prescribes medications and completes discharge instructions. Antibiotics were not prescribed by Dr. Lunt, and the dog was discharged without them. Respondent further stated that due to the pandemic they had a higher than normal caseload and standard procedures have been difficult to follow. Additionally, due to lack of client interaction, Respondent did not have a typical discharge conversation with Complainant; she did not ever meet or speak with Complainant. Antibiotics, besides the injections administered while in the hospital (last injection 4/10/20 at 12:40pm?), were not prescribed.

11. Although there was no guarantee that the outcome would be different even if antibiotics had been prescribed sooner, Complainant was given a full refund.

COMMITTEE DISCUSSION:

The Committee expressed concerns with the hospital protocol that fell through in this case with respect to the surgeon ordering medications that will to go home with the pet. They also commented that it was interesting that the surgeon would order medications to go home for an animal that would remain hospitalized for a few days, as the animal's condition could change.

Respondent did not review the discharge instructions for the dog; she, nor technical staff, noticed that the dog was not prescribed antibiotics. Although it is not known if the outcome would have been different, the antibiotics not being dispensed made a significant difference and likely contributed to the death of the dog.

Some Committee members felt the surgeon should have been the one to prescribe the antibiotics. However, the case was transferred to Respondent; she was responsible for the dog's care and was in charge of the dog's discharge. Dog bite wounds warrant antibiotics to be dispensed.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that possible violations of the *Veterinary Practice Act* occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board find:

ARS § 32-2232 (11) gross negligence; treatment of a patient or practice in veterinary medicine resulting in injury, unnecessary suffering or death that was caused by carelessness, negligence, or the disregard of established principles or practices for not dispensing antibiotics to the dog at discharge.

Vote: The motion was approved with a vote of 5 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.

TR

Tracy A. Riendeau, CVT
Investigative Division

DOUGLAS A. DUCEY
GOVERNOR



VICTORIA WHITMORE
EXECUTIVE DIRECTOR

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, SUITE 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1-PET FAX (602) 364-1039

CERTIFIED MAIL
9489009000276265240836

November 23, 2020

Hanna Wachtel, DVM
ADDRESS ON FILE

LETTER OF CONCERN – 20-103 - In Re: Hannah Wachtel, DVM

Dear Dr. Wachtel:

At its meeting on November 18, 2020, the Arizona State Veterinary Medical Examining Board considered information presented in the complaint case opened by the Board regarding a complaint filed by Ms. Lori Deis.

In each case, the Board considers the situation and the professional's response, as well as all relevant information. In this matter, after review and discussion, the Board voted to issue you a Letter of Concern pursuant to A.R.S. § 32-2234(D). This Letter of Concern is regarding the need to ensure that proper oversight occurs during the process of dispensing medications (in this case, antibiotics), at the time of discharge.

A Letter of Concern is defined in A.R.S. § 32-2201(12) as "...an advisory letter to notify a veterinarian that, while there is insufficient evidence to support disciplinary action about certain aspects of the case, the Board believes the veterinarian should modify or eliminate certain practices and that continuation of the activities that led to the information being submitted to the Board may result in action against the veterinarian's license."

We hope you will take this advisory letter in the spirit that it is intended to avoid any other potential violations in the future.

Respectfully,
FOR THE BOARD

A handwritten signature in black ink, appearing to read "V. Whitmore".

Victoria Whitmore
Executive Director

cc: Lori Deis
David Stoll, Esq.